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Docket No.: TRAUMA 3.0-349  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Andreas Werner Speitling

Application No.: 10/005,054

Group Art Unit: 1615

Filed: December 3, 2001

Examiner: M. Young

For: DEVICE FOR USE WITH THERAPEUTIC OR  
SURGICAL INSTRUMENTS, IMPLANTS  
AND EQUIPMENT THEREFOR

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**INFORMATION DISCLOSURE STATEMENT AND  
REQUEST FOR CONSIDERATION OF INFORMATION UNDER 37 CFR § 1.97 (C)**

Dear Sir:

It is respectfully requested that the references listed on the enclosed form be made of record and considered with respect to the above-referenced U.S. patent application. A copy of each reference is enclosed. Submission of the present Information Disclosure Statement should not be taken as an admission that the cited references are legally available prior art or that the same are pertinent or material.

It is respectfully requested that the references cited in the enclosed form be considered pursuant to 37 C.F.R. § 1.97(c).

Please charge deposit account No. 12-1095 in the amount of \$180.00 pursuant to

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I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: October 27, 2003

Signature: 

(Raymond W. Augustin)

37 C.F.R. § 1.17(p). In the event that any additional fee is due in connection with the present request, the same should be charged to our deposit account No. 12-1095.

Dated: October 27, 2003

Respectfully submitted,

By 

Raymond W. Augustin

Registration No.: 28,588

LERNER, DAVID, LITTENBERG,

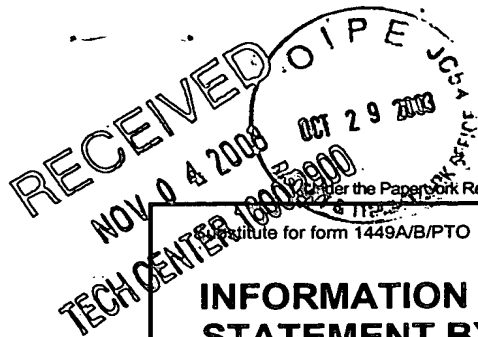
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Attorney for Applicant



SUBSTITUTE for form 1449A/B/PTO <b>INFORMATION DISCLOSURE          STATEMENT BY APPLICANT</b> <i>(Use as many sheets as necessary)</i>				<b>Complete if Known</b>	
				Application Number	10/005,054
				Filing Date	December 3, 2001
				First Named Inventor	Andreas Werner Speitling
				Art Unit	1615
				Examiner Name	M. Young
Sheet	1	of	1	Attorney Docket Number	TRAUMA 3.0-349

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code <sup>2</sup> (if known)			
	AA	US-6,153,210	11-28-2000	Roberts et al.	

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>5</sup> (if known)				

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature		Date Considered	
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